



# 149570  
# 500 -  
3/5/20  
P02

# Application for Alcoholic Beverage License

Business Name: BASH EVENT HALL

Business Address: 3870 LAWRENCEVILLE HWY.

1. Type of Application (check one):  New  Renewal  Amendment

2. Administrative and Investigation Fees (does not apply to renewals)

Packaged Beer & Wine Sales - \$250  All Other Applications - \$500  Breweries & Distilleries - \$200

3. Type of Business (check one):

- Bona Fide Eating Establishment
- Indoor Comm. Recreational Establishment
- Banquet/Event Hall
- Supermarket
- Package Store
- Other Retail Business
- Convenience Store
- Hotel Minibar

4. License(s) Applying For (check all applicable):

Retail Package & Retail Consumption On Premises:

Brewery - \$500  Distillery - \$500

Retail Package:

- Beer (Includes Sunday Sales) - \$850
- Beer And Wine (Includes Sunday Sales) - \$1,700
- Distilled Spirits, Beer And Wine (Includes Sunday Sales) - \$5,000
- Hotel Minibar - Beer And Wine (Includes Sunday Sales) - \$320
- Hotel Minibar - Distilled Spirits, Beer And Wine (Includes Sunday Sales) - \$1,390

Retail Consumption On Premises:

- Beer (Includes Sunday Sales) - \$850
- Beer And Wine (Includes Sunday Sales) - \$1,700
- Beer, Wine & Distilled Spirits (Includes Sunday Sales) - \$7,200
- Banquet Hall - Beer (Includes Sunday Sales) - \$850
- Banquet Hall - Wine (Includes Sunday Sales) - \$850
- Banquet Hall - Beer & Wine (Includes Sunday Sales) - \$1,700
- Banquet Hall - Beer, Wine & Dist. Spirits (Includes Sunday Sales) - \$7,200

(Note: 3/4 of fee after April 1, 1/2 of fee after July 1, 1/4 of fee after Oct. 1)



# Application for Alcoholic Beverage License

## 5. Business:

(a) Full Name: BASH EVENT HALL

(b) Location: 3870 LAWRENCEVILLE HWY.

Street No.	Street Name			
<u>LILBURN</u>		<u>GA.</u>	<u>30041</u>	
City		State	Zip	Phone Number

(c) Mailing Address (if different):

Street No.	Street Name			
<u>LOGANVILLE</u>		<u>GA</u>	<u>30052</u>	<u>770</u>
City		State	Zip	Phone Number

(d) Federal Employer Identification Number: \_\_\_\_\_

(e) State Withholding Number: \_\_\_\_\_

(f) State Sales Tax Number: \_\_\_\_\_

(g) Other City of Lilburn or Gwinnett County License (specify type of license, issuer and number): \_\_\_\_\_

## 6. Owner:

(a) Full Name: FABIOLA VELIZ Social Security #: \_\_\_\_\_

(b) Home Address: \_\_\_\_\_

Street No.	Street Name			
<u>LOGANVILLE</u>		<u>GA</u>	<u>30082</u>	
City		State	Zip	Phone Number

(c) Mailing Address (if different):

Street No.	Street Name			
City		State	Zip	Phone Number

(d) Other City of Lilburn or Gwinnett County License (specify type of license, issuer and number): \_\_\_\_\_

## 7. Registered Agent (must be a Gwinnett County resident):

(a) Full Name: FABIOLA VELIZ

(b) Location: \_\_\_\_\_

Street No.	Street Name			
<u>LOGANVILLE</u>		<u>GA</u>	<u>30052</u>	
City		State	Zip	Phone Number

(c) Mailing Address (if different):

Street No.	Street Name			
City		State	Zip	Phone Number

(d) Other City of Lilburn or Gwinnett County License (specify type of license, issuer and number): \_\_\_\_\_



# Application for Alcoholic Beverage License

## 8. Type of Ownership (check one):

- Sole Ownership
- Partnership
- Private Held Corporation
- Public Held Corporation Subject To S.E.C. Regulations
- Limited Liability Company
- Other

## 9. For Partnership Only:

- (a) Date the partnership was formed:
- (b) Attach partnership agreement
- (c) List partners:

*NA*

Name	Social Security Number	G-General		Interest Investment Participation \$ / %
		L-Limited	S-Silent	

## For Corporation Only:

- (a) Date of Incorporation:
- (b) Place of Incorporation:
- (c) Parent corporation, if applicable:
- (d) Number of shares of capital stock authorized:
- (e) Number of shares of outstanding stock:
- (f) Is the corporation owned by a parent corporation or held by a holding company? If yes, please explain:

- (g) For corporations other than a publicly held corporation subject to S.E.C. Regulations, list officers, directors, and principal shareholders with 20% or more of the stock:

Name	Social Security Number	Position	Interest Investment Participation
			%



# Application for Alcoholic Beverage License

## 10. Financing:

(a) Bank to be used by business, including branch: \_\_\_\_\_

(b) Total amount of capital that is or will be invested in business by party/parties: \_\_\_\_\_

(c) Total amount of funds invested by the owner: \_\_\_\_\_

(d) Total amount of funds invested by party/parties other than owner: \_\_\_\_\_

(e) Capital borrowed, if any:

Name of Lender	Date	Amount	Effective Annual Interest Rate

## 11.

Has owner and/or individual partner, shareholder, director, or officer any financial interest in any manufacturer or wholesaler of alcoholic beverage?

yes  no

Has owner and/or individual partner, shareholder, director, or officer received any financial aid or assistance from any manufacturer of alcoholic beverage?

yes  no

If answer is "yes" to either of the immediate foregoing, explain:

## 12.

Show hereunder any and all persons, corporation, partnerships, or associations (other than persons stated herein as owner(s), directors, or officers) who have received or will receive, as a result of your operation under the requested license, any financial gain or payment derived from any interest or income from the operation. (Financial gain or payment shall include payment or gain from any interest in the land, fixtures, building, stock, and any other asset of the proposed operation under the license). In the event any corporation is listed as receiving an interest or income from this operation, show the names of the officers and directors of said corporation together with the names of the principal stockholders.

*no*

## 13.

List all other businesses engaged in sale of alcoholic beverages of which that you the owner, or any individual, partner, shareholder, officer or director, are interested in, employed by or associated with in any way whatsoever, or have been interested in, employed by, or associated with in the past.

*no*